

| As a below                                   | v named                                  | inventor, I hereby declare                             | e that:     |  |                                     |
|--|--|--|-------------|--|-------------------------------------|
| This decla                                   | ration is                                | of the following type:                                 |             |  |                                     |
| ☐ d  | riginal<br>esign<br>uppleme<br>ational s | ntal<br>tage of PCT                                    |             | divisional continuation continuation-in-part   |                                     |
| My reside                                    | nce, pos                                 | office address and citizen                             | nship are   | as stated below next to my nar   | me.                                 |
| joint inventor (if pl<br>sought on the inver | ural nam                                 | es are listed below) of the                            | e subject : | only one name is listed below) matter which is claimed and fo AEDIC SUPPORT AND THE                    | r which a patent is                 |
| (a) [<br>(b) [<br>(c) [2                     | ☐ was fi<br>☑ was d                      | escribed and claimed in P                              | CT Intern   | ication Serial No<br>national Application NoPC<br>on September 12, 1998 (if any)                       |                                     |
|  |  | I have reviewed and unde<br>ended by any amendment     |             | e contents of the above identification to above.   | ed specification,                   |
|  |  | duty to disclose informat<br>ode of Federal Regulation |             | n is material to the examination (a).  | of this application in              |
| application(s) for p                         | atent or                                 | inventor's certificate liste                           | d below a   | 5, United States Code, § 119 of<br>and have also identified below a<br>hat of the application of which | any foreign application             |
| (d) [<br>(e) [                               |  | ch applications have been application have been filed  |             | ws:  |                                     |
| Prior Foreign Appl                           | ication(s                                | )  |             |  |                                     |
| Country<br>(or indicate if Po                | CT                                       | Annlingtion North                                      |             | Date of Filing (day, month, year)  | Priority Claims<br>Under 37 USC 119 |
| (or mulcate if F                             | (1)                                      | Application Number                                     |             | (au), monui, jour)   | Yes No                              |
|  |  |  |             |  | ☐ Yes ☐ No                          |
|  |  |  |             |  | ☐ Yes ☐ No                          |

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a), regarding events which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

☐ Yes ☐ No

| Application Serial No. | Filing Date     | Status-patented, pending, abandoned |
|------------------------|-----------------|-------------------------------------|
| 08/705218              | August 29, 1996 | abandoned                           |
|                        |                 |                                     |
| L                      |                 |                                     |

I hereby declare that an statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Wherefore I pray that Letters Patent be granted to me for the invention or discovery described and claimed in the foregoing specification and claims, and I hereby subscribe my name to the foregoing specification and claims, declaration, power of attorney, and this petition.

| T HAT CO.1 PLAT  |                                       |
|--|---------------------------------------|
| Full Name of Sole or First Inventor:   |                                       |
| Joseph M. Iglesias   | Data Cianada                          |
| Inventors Signature:   | Date Signed:                          |
|  | 4/30/01                               |
| / / C Seg  | · · · · · · · · · · · · · · · · · · · |
| Residence (City, State and/or Country):  | Citizenship:                          |
|  | U.S.                                  |
| Post Office Address(Street, City, State, Zip Code, Country):   |                                       |
|  |                                       |
| Full Name of Second Inventor:  |                                       |
| Eric E. Johnson  |                                       |
| Inventors Signature:   | Date Signed:                          |
| inventors signature.   | Date Signed.                          |
|  |                                       |
| D :1 (0: 0: 1/ 0)  | Cisi                                  |
| Residence (City, State and/or Country):  | Citizenship:                          |
|  | US                                    |
| Post Office Address(Street, City, State, Zip Code, Country):   |                                       |
|  |                                       |
| Full Name of Third Inventor:   |                                       |
| Tracy E. Grim  |                                       |
| Inventors Signature:   | Date Signed:                          |
|  | , -                                   |
| 1 VI CIA- MIN  | 4/30/01                               |
| Residence (City, State and/or Country):  | Citizenship:                          |
| Residence (Chr., State alayor Country).  | -                                     |
|  | US                                    |
| Part Office Address(Street City State 7in Code Country):   | US                                    |
| Post Office Address(Street, City, State, Zip Code, Country):   | US                                    |
|  | US                                    |
| Full Name of Fourth Inventor:  | US                                    |
| Full Name of Fourth Inventor: William K. Arnold  |                                       |
| Full Name of Fourth Inventor:  | Date Signed:                          |
| Full Name of Fourth Inventor: William K. Arnold  |                                       |
| Full Name of Fourth Inventor: William K. Arnold  |                                       |
| Full Name of Fourth Inventor: William K. Arnold Inventors Signature  Musery  M |                                       |
| Full Name of Fourth Inventor: William K. Arnold  |                                       |
| Full Name of Fourth Inventor: William K. Arnold Inventors Signature  Museum G. M. S. Signature  Museum G. M. Signatur | Date Signed:  Gitizenship:            |



| As a bel                             | ow name                                | l inventor, I hereby de                       | eclare that:                |  |          |                         |             |                  |
|--------------------------------------|--|---|-----------------------------|--|----------|-------------------------|-------------|------------------|
| This dec                             | laration is                            | s of the following type                       | e:                          |  | •        |                         |             |                  |
|                                      | original<br>design<br>supplemenational | ental<br>stage of PCT                         |                             | divisional continuation continuation-in-part   |          |                         |             |                  |
| My resid                             | lence, pos                             | t office address and c                        | itizenship are              | as stated below next to my n   | ame.     |                         |             |                  |
| joint inventor (if sought on the inv | plural nan<br>ention ent               | nes are listed below)                         | of the subject<br>LE ORTHOP | only one name is listed below<br>matter which is claimed and<br>AEDIC SUPPORT AND TH         | for wh   | ich a pa                | iten        | irst and<br>t is |
| (a)<br>(b)<br>(c)                    | was f                                  |   |                             | lication Serial No<br>national Application No<br>on September 12, 1998 ( <i>if ar</i>        |          | <del>.</del><br>S97/152 | <u>265.</u> | , filed on       |
|                                      |  | I have reviewed and it ended by any amendr    |                             | e contents of the above ident to above.  | ified sp | pecifica                | tion        | ,                |
|                                      |  | duty to disclose info                         |                             | h is material to the examinati<br>5(a).  | on of t  | his appl                | icat        | ion in           |
| application(s) for                   | patent or                              | inventor's certificate                        | listed below                | 5, United States Code, § 119 and have also identified below that of the application of which | v any f  | foreign                 | app         |                  |
| (d)<br>(e)                           |  | ch applications have to application have been |                             | ws:  |          |                         |             |                  |
| Prior Foreign App                    | olication(s                            | 3)  |                             |  |          |                         |             |                  |
| Country (or indicate if              | PCT)                                   | Application Nur                               | nher                        | Date of Filing (day, month, year)  |          | Priority nder 37        |             |                  |
| (or marcate it                       |  | Application Nur                               | iioei                       | (44), 11011111, 1441)  | +        | Yes                     |             | No               |
|                                      |  |   |                             |  |          | Yes                     | _           | No               |
| ·                                    |  |   |                             |  | -        | Yes Yes                 |             | No<br>No         |

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a), regarding events which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

| Application Serial No. | Filing Date     | Status-patented, pending, abandoned |
|------------------------|-----------------|-------------------------------------|
| 08/705218              | August 29, 1996 | abandoned                           |
|                        |                 |                                     |
|                        |                 |                                     |

I hereby declare that a statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Wherefore I pray that Letters Patent be granted to me for the invention or discovery described and claimed in the foregoing specification and claims, and I hereby subscribe my name to the foregoing specification and claims, declaration, power of attorney, and this petition.

| Full Name of Sole or First Inventor:  |   |
|---|---|
| Joseph M. Iglesias  |   |
| Inventors Signature:  | Date Signed:                                |
|   |   |
|   |   |
| Residence (City, State and/or Country):   | Citizenship:                                |
|   | U.S.  |
| Post Office Address(Street, City, State, Zip Code, Country):  |   |
|   |   |
| Full Name of Second Inventor:   |   |
| Eric E. Johnson   |   |
| Inventors Signature:  | Date Signed:                                |
| Par Al/Mar  | M   |
| any ga 40   | May 15,2001                                 |
| Residence (City, State and/or County):  | Citizenship:                                |
| Carlsbad, California (A) Post Office Address (Street, City, State, Zip Code, Country):  | US  |
| Post Office Address(Street, City, State, Zip Code, Country):  |   |
| 2820 Avenida Valera, carlstad. CA 92009   |   |
|   |   |
| Full Name of Third Inventor:  |   |
|   |   |
| Full Name of Third Inventor:  | Date Signed:                                |
| Full Name of Third Inventor: Tracy E. Grim  | Date Signed:                                |
| Full Name of Third Inventor: Tracy E. Grim Inventors Signature:   | _   |
| Full Name of Third Inventor: Tracy E. Grim  | Citizenship:                                |
| Full Name of Third Inventor: Tracy E. Grim Inventors Signature:  Residence (City, State and/or Country):  | _   |
| Full Name of Third Inventor: Tracy E. Grim Inventors Signature:   | Citizenship:                                |
| Full Name of Third Inventor: Tracy E. Grim Inventors Signature:  Residence (City, State and/or Country):  | Citizenship:                                |
| Full Name of Third Inventor: Tracy E. Grim Inventors Signature:  Residence (City, State and/or Country):  | Citizenship:                                |
| Full Name of Third Inventor: Tracy E. Grim Inventors Signature:  Residence (City, State and/or Country):  Post Office Address(Street, City, State, Zip Code, Country):  | Citizenship:<br>US                          |
| Full Name of Third Inventor: Tracy E. Grim Inventors Signature:  Residence (City, State and/or Country):  Post Office Address(Street, City, State, Zip Code, Country):  Full Name of Fourth Inventor:   | Citizenship:                                |
| Full Name of Third Inventor: Tracy E. Grim Inventors Signature:  Residence (City, State and/or Country):  Post Office Address(Street, City, State, Zip Code, Country):  Full Name of Fourth Inventor: William K. Arnold   | Citizenship:<br>US                          |
| Full Name of Third Inventor: Tracy E. Grim Inventors Signature:  Residence (City, State and/or Country):  Post Office Address(Street, City, State, Zip Code, Country):  Full Name of Fourth Inventor: William K. Arnold Inventors Signature:  | Citizenship:<br>US<br>Date Signed:          |
| Full Name of Third Inventor: Tracy E. Grim Inventors Signature:  Residence (City, State and/or Country):  Post Office Address(Street, City, State, Zip Code, Country):  Full Name of Fourth Inventor: William K. Arnold   | Citizenship: US  Date Signed:  Citizenship: |
| Full Name of Third Inventor: Tracy E. Grim Inventors Signature:  Residence (City, State and/or Country):  Post Office Address(Street, City, State, Zip Code, Country):  Full Name of Fourth Inventor: William K. Arnold Inventors Signature:  Residence (City, State and/or Country): | Citizenship:<br>US<br>Date Signed:          |
| Full Name of Third Inventor: Tracy E. Grim Inventors Signature:  Residence (City, State and/or Country):  Post Office Address(Street, City, State, Zip Code, Country):  Full Name of Fourth Inventor: William K. Arnold Inventors Signature:  | Citizenship: US  Date Signed:  Citizenship: |